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CONFIRMATION NO. 9583

SERIAL NUMBER 10/805,737	FILING OR 371(c) DATE 03/22/2004 RULE	CLASS 132	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. J&J-5074
APPLICANTS Harold D. Ochs, Flemington, NJ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/05/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY NJ	SHEETS DRAWING 6	TOTAL CLAIMS 23
				INDEPENDENT CLAIMS 4
ADDRESS 000027777				
TITLE Dental floss head device with a flavor delivery means				
FILING FEE RECEIVED 1040	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	